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to thirty-six hours without there being time for buboes to be noticed. Later cases proved more typical of the ordinary so-called bubonic plague. We had one very rapid case, already referred to, in which severe diarrhea was the principal feature. Buboes were noted in the inguinal femoral, iliac, submaxillary, occipital, and axillary regions. Had we not known that the first cases were plague, the cases with swollen submaxillary glands might have escaped detection, as there was at the same time in Bangkok a widespread epidemic of true mumps.

Only toward the end of the outbreak were recoveries obtained. One pneumonic case was noted.

*Death rate.*—Of a total of 29 cases 23 died, giving a death rate of 79 per cent, which agrees with epidemics in other places in the East.

*Bacteriological examination.*—All cases were not verified by bacteriological examination, but from time to time smears were made from glands excised post-mortem, and in all typical plague bacilli were discovered in abundance.

*Administrative difficulties.*—So far as the Siamese Government was concerned everything went well. His Majesty the King, recognizing that prompt measures were necessary, gave full power to the medical officer of health, and placed the whole police force at his disposal.

The usual scare arose, however. Wild rumors arose all over the town that the health department was kidnapping women and children, taking them to the plague hospital, there putting ice on their chests until death supervened, when the bodies were opened and the gall bladders removed for the purpose of preparing fresh poison wherewith to kill fresh victims. The lives of the medical officer of health and his assistants were so persistently threatened that police guards had to be provided. A royal proclamation explaining the nature of the disease and the steps which were being taken to stamp it out was published with excellent results. This, with the prosecution of a person who was discovered spreading false reports, allayed all excitement in two weeks.

#### WEST INDIES.

##### *Report from Barbados—Inspection of vessels—Smallpox in Grenada—Smallpox and yellow fever at Manaos and Para, Brazil.*

Assistant Surgeon Ward reports, June 22, as follows:

During the week ended June 17, 1905, bills of health were issued to 5 steamships and 1 sailing vessel with 219 crew, 74 cabin, and 138 steerage passengers. Of this number I inspected 4 steamships, 164 crew, and 138 steerage passengers. There were 1 crew, 38 cabin, and 47 steerage passengers taken on at this port.

The quarantine authorities of this port have received a dispatch from Grenada, West Indies, dated June 15, which says that during the last fortnight 4 additional cases of smallpox developed in the original infected district (parish of St. Andrew) in children who were vaccinated contacts of a previous case, the last case occurring on the 5th instant.

On the arrival of the British steamship *Horatio* at this port on the 21st instant, I noticed the following remarks on the American bill of health issued at Manaos and Para, respectively:

Manaos, June 12: "On the 4th instant there arrived at Manaos from the Rio Jurua a steamer with 10 cases of smallpox. All necessary

precautions were taken, the steamer thoroughly disinfected, the patients isolated, and up to the present no deaths have been reported." The last fortnight there were 2 cases and 1 death from yellow fever.

Para, June 15: "A vessel arrived last night from Manaus with 1 case of smallpox on board. Passengers were isolated and the vessel fumigated." The last fortnight there were 2 cases and 2 deaths from yellow fever.

The health of Barbados remains good; no quarantinable diseases have been reported.

*Report from Castries, St. Lucia Island—Transactions of Service—Sanitary conditions.*

Passed Assistant Surgeon Frick reports, June 24, as follows:

Week ended June 24, 1905: Bills of health issued, supplemental, 2; original, 1. Vessels fumigated, none. The sanitary condition of the port continues good.

FOREIGN AND INSULAR STATISTICAL REPORTS OF COUNTRIES AND CITIES—UNTABULATED.

BRAZIL—*Pernambuco*.—Two weeks ended May 31, 1905. Estimated population, 200,000. Total number of deaths, 560, including measles 4, smallpox 249, and 56 from tuberculosis.

CANADA—*Ontario—Hamilton*.—Month of June, 1905. Census population, 57,561. Total number of deaths, 67, including diphtheria 3, measles 7, scarlet fever 1, and 10 from tuberculosis.

DUTCH GUIANA—*Paramaribo*.—Month of May, 1905. Estimated population, 33,003. Total number of deaths, 70. No contagious diseases reported.

FRANCE—*St. Etienne*.—Two weeks ended May 31, 1905. Estimated population, 149,000. Total number of deaths, 174, including diphtheria 3, enteric fever 1, whooping cough 2, and 24 from tuberculosis.

GERMANY—*Weimar*.—Month of May, 1905. Census population, 30,829. Total number of deaths, 55, including diphtheria 2, and 2 from enteric fever.

GIBRALTAR.—Three weeks ended June 18, 1905. Estimated population, 27,460. Total number of deaths, 33. No deaths from contagious diseases reported.

GREAT BRITAIN—*England and Wales*.—The deaths registered in 76 great towns in England and Wales during the week ended June 17, 1905, correspond to an annual rate of 13.4 per 1,000 of the aggregate population, which is estimated at 15,609,377.

*Bradford*.—Two weeks ended June 17, 1905. Estimated population, 286,799. Total number of deaths 140, including diphtheria 4, enteric fever 2, measles 2, whooping cough 6, and 7 from phthisis pulmonalis.

*London*.—One thousand one hundred and ninety-one deaths were registered during the week, including measles 46, scarlet fever 6, diphtheria 9, whooping cough 36, enteric fever 2, and 14 from diarrhea.